

Quantity Purchase Agreement With The State Of Indiana

Qty Purchase Agreement QPA Number		Page
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Requisition Nbr.:	B9-4-051	
Effective Date:	08/01/2003	
Expiration Date:	07/31/2004	
Agency Number:		
Facility:	Logansport State Hospital	
Vendor Federal ID:	350940854	
Vendor Telephone Nbr:	219-838-0155	
Name Of Contact Pers:	Bette Scherette	
FAX Number:	219-838-1801	

Vendor PLEASANT VIEW DAIRY CORP
Remit to: P O BOX 1949
HIGHLAND IN 46322

Name and PLEASANT VIEW DAIRY CORP
Address Cntct: Bette Scherette
of Vendor: P O BOX 1949
HIGHLAND IN 46322

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division, has the option to purchase the items listed below under the terms of this agreement.
The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date. The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement.
Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.

Line Number	Quantity	UNIT	Article and Description	Unit Price
1	999,999,999.00	CS	000000000100004166 White Milk, 1%, Gallon Plastic Container, 4-1 Gallon/Case	7.6000
2	999,999,999.00	EA	000000000100004167 Milk, white, 2% lowfat, pasteurized, grade A, plastic coated 1/2 pint carton.	0.1520
3	999,999,999.00	EA	000000000100004172 Milk, White, Skim, 1/2 Pint Containers	0.1430
4	999,999,999.00	EA	000000000100004177 Milk, Chocolate. 1% LF, 1/2 Pint Containers	0.1540
5	999,999,999.00	CH	000000000100004178 Sour Cream, Low Fat, 5# Containers	4.0000
6	999,999,999.00	CH	000000000100004179 Cottage Cheese, Low Fat, 5% Container	4.7500
7	999,999,999.00	CS	000000000100004271 Whipped Topping, 12/15 oz. Container 12/Case=\$15.36 (Pleasant View)	18.0000
8	999,999,999.00	CH	000000000100004181 Yogurt, Fruited Variety, 12/8 oz. Container	0.4900
9	999,999,999.00	CT	000000000100004273 Yogurt, Lite, SugarFree, 8oz Container, Assorted Flavors, Cherry, Peach, Blueberry, Strawberry, Pineapple, Vanilla & Lemon	0.4900

Signature of Purchasing Officer	Typed Name	Signature Of Approval Office Of the State Attorney General	
	Date Signed	Typed Name	Date Signed
Authorized Signature	Indiana Department Of Administration Procurement Division 402 West Washington Street, Rm W468 Indianapolis, Indiana 46204 Telephone: (317) 232-3053		